

Iowa Department of Education

Grimes State Office Building
Des Moines, IA 50319-0146

Application for Employment

PRINT OR TYPE

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Social			Security		Number		Last Name		First Name	Middle Name or Initial
Number and Street					City			State		Zip Code
()					()					
Phone (area code) number – day					Phone (area code) number – evening					
E-mail address										

GENERAL INSTRUCTIONS:

Complete the application using typewriter or pen. An incomplete application, including failure to sign the application, may result in the application being returned.

1. To assist you in completing the application, you may request job specifications from the Department of Education.
2. All information must be entered on the application. Resumes may only be used to supplement the application, not as a substitute.
3. All applications for professional staff positions must include a current set of transcripts.
4. The Department may contact you later for other information or documents.
5. The Department will not return your application or other materials sent to us. Make photocopies before submitting if you think they will be needed.
6. It is your responsibility to keep the Department informed of changes in name, address, or availability. The latest application submitted will determine your availability for all jobs.
7. A complete application will be kept in active status a minimum of six months. This period may be extended when requested by the applicant.

State the Job Title(s) for which you are applying:	Department of Education Use Only
1.	1.
2.	2.
3.	3.

It is the policy of the Iowa Department of Education not to discriminate on the basis of race, color, national origin, gender, disability, religion, creed, age, or marital status in its programs or employment practices. If you have questions or grievances related to this policy, please contact the Bureau of Administration and School Improvement Services, Grimes State Office Building, Des Moines, Iowa 50319-0146, (515) 281-5811.

EXPERIENCE:

List your work experience, starting with the most recent. If you have had more than one position with the same organization or in the case of the military had different assignments, list each separately.

Volunteer and homemaker work experience, where applicable, will be evaluated in the same manner as paid employment and should be described here in the same way.

IMPORTANT: You must describe your experience in detail so that the Department can fairly assess the level of responsibility. Include the number and titles of people supervised and equipment or facilities managed.

To describe additional work or add more detail to “Duties” section, complete a blank sheet of paper using the same format as here and identify the job to which it relates.

		FROM	Mo.	Day	Year
Organization	Kind of Work	TO	Mo.	Day	Year
Address	Your Title	CHECK ONE:			
City	State	Zip	FULL TIME		PART TIME
			CURRENT SALARY		
Duties:					

		FROM	Mo.	Day	Year
Organization	Kind of Work	TO	Mo.	Day	Year
Address	Your Title	CHECK ONE:			
City	State	Zip	FULL TIME		PART TIME
Duties:					

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Organization	Kind of Work	TO	Mo.	Day	Year
Address	Your Title	CHECK ONE:			
City	State	Zip	FULL TIME		PART TIME
Duties:					

EDUCATION RECORD

Name and location of schools or training beyond high school	Dates Attended		Credit Received		Field of study or area of concentration				Type of degree obtained
	Mo-Yr	Mo-Yr	Quarter Hours	Semester Hours	Major	Hours	Minor	Hours	

If you have not completed your course of study yet, please give the anticipated completion date:

SPECIAL SKILLS, LICENSURE, LANGUAGES, ETC.

Some job vacancies may have special requirements for candidates to qualify. Some general examples are nursing certification, sign language proficiency, licenses psychologist, etc. If you hold a current Iowa teaching certificate/license, please list your folder number and any teaching or administrative endorsements. Note special skills and other qualifications you have that may be applicable to the jobs for which you are applying.

VETERAN’S PREFERENCE QUALIFICATION

VETERAN’S PREFERENCE QUALIFICATION: To claim veteran’s preference, you must submit proof of service (such as a DD-214) that includes the date of induction, date of honorable separation, and social security number. This will be kept as long as you are an active applicant, so send a photocopy only. If your name has been changed from that listed on your separation document, print it at the top of the document as it appears on this application. To be eligible for veteran’s preference, you must be a citizen and resident of Iowa.

I now maintain a residence in Iowa and claim veteran’s preference.

Yes

No

READ BEFORE SIGNING

I CERTIFY that this application contains no willful misrepresentations and that the information is true and complete to the best of my knowledge. I understand that should investigation at any time disclose any misrepresentations, my application will be rejected, my name will be removed from consideration for employment, and I will be dismissed from state service if employed. I also understand that in compliance with Chapter 22, Iowa Code, information on this application will be available to the public upon request.

I REQUEST CONFIDENTIAL TREATMENT OF MY APPLICATION FOR EMPLOYMENT.

SIGN HERE IN INK: _____ DATE: _____

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Applicant Survey

The department of Education is committed to the principles of Equal Employment Opportunity and Affirmative Action. Your assistance in helping us to collect information about job applicants would be appreciated. Please share some information about yourself to assist us in doing this. This information is voluntary and will be used only for program evaluations and reporting requirements, and is removed before your application is processed. **PLEASE WRITE YOUR NUMBERED RESPONSES TO ITEMS "A" THROUGH "F" IN THE CORRESPONDING BOXES.**

A**B****C****D****E****F****A. What sex are you?**

- 0 Male
- 1 Female

B. What is your age?

- 0 18-29
- 1 30-39
- 2 40-49
- 3 50-59
- 4 60-69
- 5 70 or over

C. What is your highest level of education?

- 1. BA, BS or similar undergraduate degree
- 2. MA, MS or similar graduate degree
- 3. PhD, JD or similar professional degree

D. Of which race/ethnic group do you consider yourself a member?

- 0 *White:* Origins in any of the original peoples of Europe, North Africa, or the Middle East
- 1 *African American:* Origins in any of the black racial groups of Africa
- 2 *Asian/Pacific Islander:* Origins in any of the original peoples of the Far East, Southeast Asian, Indian Subcontinent, or the Pacific Islands
- 3 *Native American/Alaskan Native:* Origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition
- 4 *Latino:* Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race

E. Do you have a disability that is a physical or mental impairment that substantially limits one or more major life activities; do you have a record of such an impairment; or are you regarded as having such an impairment?

- 0 No
- 1 Yes

F. How did you learn about this job?

- 1 Iowa state agency or employee
- 2 State Government Job Fair
- 3 Public Library
- 4 Internet/Website
- 5 College, University or Area Community College Placement Office
- 6 Newspaper, periodical or trade journal
- 7 Career Fair